	ļi		,	Substitute for Fo	DETERMIN.	ATION RECORD	nation unless it d	isplays a valid OMB control imber.	
		CLAIM	Ano IO	Dockel Number					
1		CLAIMS AS FILED - PART I (Column 1)						1011	
	FOR		NI MAED EN CE		(Column 2) NUMBER EXTRA	SMALL ENT	TIT.Y OF	OTHER THAI SMALL ENTITI	
1	CLAIM: CFR 1.16(c	c				RATE	FEE	RATE FE	
	INDEPENDENT (37 CFR 1.16(b	r Clause	mi	nus 20 = .		x s 25 = 1	OR	13	
			, mic	nus 3 = .		x s 100=	OR	x s <u>50</u> .	
	MULTIPLE DEPENDENT CLAIMPRESENT . (37 CFR 1.16(d))					+5.180	OR OR	x s 200	
	"If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL	- OR	+ 360	
	CLAIMS AS AMENDED - PART II					OR OR	TOTAL		
ŀ	471	(Column 1		(Column		31 SMALL ENTIT		0.7	
		REMAININ AFTER	G	HIGHEST NUMBER PREVIOUS	PRESENT	r PATE		OTHER THAN SMALL ENTITY	
.	Total Total Garage Control Total Garage Control Total Garage Control Total Tot	AMENOME!	Minu	PAID FOR		- 1 AU	DDI- NAL FE	RATE ADDITIONAL	
	Independent (3) OFR 1.16(b)	" 2	Minu	\$ 20		x s 25 =	OR OR	× 50 =	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				x s 100=	OR	x s 20Q		
	(3) CFR (.16(d))					+s 180=	. OR	+5360	
. -	(Column 1) (Column 2) (Column 3)					ADD'L FEE	OR	TOTAL ADD'L FEE	
	מ -	CLAIMS REMAINING AFTER		HIGHEST NUMBER	PRESENT				
Į į	Total Digentingel	AMENDMENT	Minus	PREVIOUSLY PAID FOR	EXTRA	RATE ADDITIONA	u	RATE ADDI	
AMENIONACKIT	Independent (37 CFR 1.16(6))		Minus		= .	x s 25 = FEE		TIONAL FEE	
AA	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				× s_100=	1	s 200		
ŀ	(37 CFR 1.16(d))					+ s 180=	1 -	260	
	· · · · · ·	(Column 1)	. •	(Column 2)		ADO'L FEE	OR AL	OTAL OD'L FEE	
T C	1	CLAIMS . REMAINING		HIGHEST NUMBER	(Column 3) PRESENT				
AMENDMEN.	Total	AFTER AMENDMENT	465.05	PREVIOUSLY PAID FOR	EXTRA	RATE ADDI- TIONAL		RATE ADDI-	
END	(37 CFR 1.16(c)) Indépendent (37 CFR 1.16(b))		Minus	414	=	x s 25 = FEE	1	SO TIONAL	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					x 5 100		200	
		wor tip(DEPENDE	HT CLAIM (37 CFF	+ s 180=]	360		
	· If the entry in co	Humn 1 is less than	the entry	in ∞lumn 2, write	TOTAL ADO'L FEE	TOT	Al		
• • • • • • • • • • • • • • • • • • • •	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".								

The Highest Number Previously Paid For IN THIS SPACE is less than 3, enter '3'.

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete amount of time you require to complete dapplication form to the USPTO. Time will vary depending upon the individual case, Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS